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PTO/SB/17 (12-04v2)

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Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

## FEE TRANSMITTAL for FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$180.00)

### Complete if Known

Application Number	09/709,758
Filing Date	November 10, 2000
First Named Inventor	Oleg J. Abramov
Examiner Name	Blane J. Jackson
Art Unit	2685
Attorney Docket No.	111150-014.UTL

### METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 50-2075 Deposit Account Name: Procopio, Cory, Hargreaves & Savitch LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below  
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  
☐ Charge fee(s) indicated below, except for the filing fee  
☒ Credit any overpayments

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### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	<u>Small Entity</u> Fee (\$)	Fee (\$)	<u>Small Entity</u> Fee (\$)	Fee (\$)	<u>Small Entity</u> Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

#### 2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	<u>Small Entity</u> Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
<u>Total Claims</u>		
- 20 or HP = _____ x _____ = _____		
HP = highest number of total claims paid for, if greater than 20		
<u>Indep. Claims</u>		
- 3 or HP = _____ x _____ = _____		
HP = highest number of independent claims paid for, if greater than 3		

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 = _____	/50= _____	(round up to a whole number) x _____	= _____	

#### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): \$180.00 for Information Disclosure Statement Fee

180.00

#### SUBMITTED BY

Signature		Registration No. 34,790 (Attorney/Agent)	Telephone 619-238-1900
Name (Print/Type)	Richard E. Campbell		Date 12/15/05

111150.000014/575259.01

**Procopio  
Cory  
Hargreaves  
& Savitch  
LLP**  
Founded 1946

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**FACSIMILE TRANSMISSION**

**DATE: December 15, 2005**

**TOTAL PAGES, INCLUDING COVER: 6**

**To:**

NAME:	FACSIMILE NO.	TELEPHONE NO.
<b>MAIL STOP AMENDMENT Commissioner for Patents U. S. Patent &amp; Trademark Office</b>	<b>(571) 273-8300</b>	

**FROM: Richard E. Campbell, Esq.  
Reg. No. 34,790**

**RE: U. S. Patent Application No. 09/709,758  
Title: DYNAMICALLY RECONFIGURABLE ANTENNA SYSTEM  
Filed: November 10, 2000  
Inventors: Oleg J. Abramov et al.  
Our Ref. No. 111150-014UTL**

**Dear Sir/Madam:**

**Transmitted herewith for processing are the following documents:**

- 1) Transmittal Letter (1 page);
- 2) Supplemental Information Disclosure Statement (2 pages);
- 3) Form PTO 1449 (1 page); and
- 4) Fee Transmittal, in duplicate (2 pages).

**BEST AVAILABLE COPY**

111150.000014/575253.01

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**DEC 15 2005**

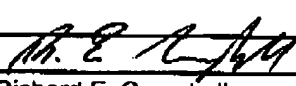
PTO/SB/21 (09-04)

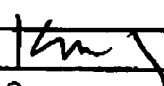
Approved for use through 07/31/2006. OMB 0851-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b>		Application Number	09/709,758
		Filing Date	November 10, 2000
		First Named Inventor	Oleg J. Abramov
		Art Unit	2685
		Examiner Name	Blane J. Jackson
		Attorney Docket Number	111150-014.UTL
(to be used for all correspondence after initial filing)			
Total Number of Pages in This Submission	6		

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Extension of Time Request (in duplicate)	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input checked="" type="checkbox"/> Information Disclosure Statement and 1449 Statement (3 pages)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Request for Refund	
	<input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	
Remarks Customer No. 27-189		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Procopio, Cory, Hargreaves & Savitch LLP		
Signature			
Printed name	Richard E. Campbell		
Date	12/15/05	Reg. No.	34,790

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to 571/273-8300 to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Signature		
Typed or printed name	Karen M. Cruz	Date
		12/15/2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**RECEIVED  
CENTRAL FAX CENTER****DEC 15 2005****PATENT**

Attorney Docket No. 111150-014.UTL

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE****Inventors: Oleg J. Abramov, et al.****Group Art Unit: 2685****Serial No. 09/709,758****Examiner: Blane J. Jackson****Filed: November 10, 2000****Title : DYNAMICALLY  
RECONFIGURABLE ANTENNA  
SYSTEM****SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT**

MAIL STOP AMENDMENT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In accordance with 37 CFR Sections 1.97 and 1.98, the item identified in this Information Disclosure Statement ("IDS") is brought to the attention of the Office. The item is listed on the attached form PTO-1449.

**INFORMATION DISCLOSURE STATEMENT FILING PROVISION**

This IDS is being submitted under 37 CFR § 1.97(c), that is after mailing of a first Office Action on the merits, but before a Final Action under 37 CFR 1.113 or a Notice of Allowance under 37 CFR § 1.311. The fee due under 37 CFR § 1.17(p) is submitted herewith.

12/16/2005 HDEHES1 00000023 502075 09709758

01 FC:1806 180.00 DA

111150.000014/575266.01

PATENT  
Attorney Docket No. 111150-014.UTL

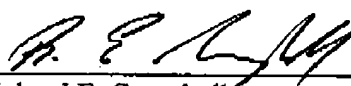
**PAYMENT AND/OR AUTHORIZATION TO CHARGE FEES:**

The Commissioner is hereby authorized to charge Deposit Account No. **50-2075**, in the amount of \$180.00, to cover the fees associated with this filing. The Commissioner is authorized to charge any additional fees required by the filing of these papers, and to credit any overpayment to Procopio's Deposit Account No. **50-2075**.

Respectfully submitted,

Procopio, Cory, Hargreaves & Savitch LLP

Dated: 12/15/05

By:   
Richard E. Campbell  
Registration No. 34,790

PROCOPIO, CORY, HARGREAVES & SAVITCH LLP  
530 B Street, Suite 2100  
San Diego, California 92101-4469  
(619) 238-1900 (Phone)  
(619) 235-0398 (Fax)  
Customer No. 27189

<b>FORM PTO-1449</b>  <b>LIST OF PATENTS AND OTHER ITEMS FOR APPLICANT'S INFORMATION DISCLOSURE STATEMENT</b>  (Use several sheets if necessary)	<b>ATTY. DOCKET NO.</b>	<b>SERIAL NO.</b>
	111150-014.UTL	09/709,758
	<b>APPLICANT:</b>	
	Oleg J. Abramov, et al.	
	<b>FILING DATE:</b>	<b>GROUP:</b>
	November 10, 2000	2685

U.S. PATENT DOCUMENTS					
Examiner Initials	Cite No.	Document Number	Publication Date/ Issue Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number-Kind Code			
	AA	6,486,832	11-26-2002	Abramov et al.	

FOREIGN PATENT DOCUMENTS						
Examiner Initials	Cite No.	Foreign Patent Document	Publication Date/Issue Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>1</sup>

NON PATENT LITERATURE DOCUMENTS				
Examiner Initials	Cite No.	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.		T <sup>1</sup>

<b>EXAMINER:</b>	<b>DATE CONSIDERED:</b>
EXAMINER: Please initial if reference is considered, whether or not citation is in conformance with MPEP 609; draw line through citation if not in conformance and not considered. Include a copy of this form with next communication to applicant. Thank you. <sup>1</sup> Applicant is to place a check mark here if English language translation is attached.	